

PS Form 3811, Apr. 1977

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

● SENDER: Complete items 1, 2, and 3.
Add your address in the "RETURN TO" space on reverse.

1. The following service is requested (check one).
☐ Show to whom and date delivered¢
☐ Show to whom, date, and address of delivery¢
☒ RESTRICTED DELIVERY
Show to whom and date delivered¢
☐ RESTRICTED DELIVERY
Show to whom, date, and address of delivery .\$.____
(CONSULT POSTMASTER FOR FEES)

2. ARTICLE ADDRESSED TO:
Mr. Paul R. Lewis
444 East Hazelwood
Venice Gardens, FL 33595

3. ARTICLE DESCRIPTION:
REGISTERED NO. CERTIFIED NO. INSURED NO.
4684916

(Always obtain signature of addressee or agent)

I have received the article described above.
SIGNATURE ☐ Addressee ☐ Authorized agent
Paul R Lewis

4. DATE OF DELIVERY 12/11/80 POSTMARK DEC 11 1980

5. ADDRESS (Complete only if requested)

6. UNABLE TO DELIVER BECAUSE: CLERK'S INITIALS

☆GPO: 1977-0-249-595

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(CONSULT POSTMASTER FOR FEES)

2. ARTICLE ADDRESSED TO:
Ms. Sharon Chapell
Route 2, Box 150-A
Remington, VA 22734

3. ARTICLE DESCRIPTION:
REGISTERED NO. CERTIFIED NO. INSURED NO.
4684917

(Always obtain signature of addressee or agent)

I have received the article described above.
SIGNATURE ☐ Addressee ☐ Authorized agent
Sharon Chapell

4. DATE OF DELIVERY POSTMARK

5. ADDRESS (Complete only if requested)

6. UNABLE TO DELIVER BECAUSE: CLERK'S INITIALS

☆GPO: 1977-0-249-595

M. ALBERT MORNINGSTAR
ATTORNEY AT LAW
203 WEST PATRICK STREET
FREDERICK, MARYLAND